

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>FW</i>	<i>70331</i>	
O.I.P.E. CLASSIFIER		<i>823</i>	<i>5 7-27-00</i>
FORMALITY REVIEW	<i>OR</i>		<i>8/25</i>
RESPONSE FORMALITY REVIEW	<i>Alena</i>	<i>654</i>	<i>1/8/01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	<i>1/23/01</i>
2	✓	✓	<i>2/1/01</i>
3	✓	✓	
4	✓	✓	
5	✓	✓	
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If more than 150 claims or 10 actions  
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